

ISSUE SLIP STAPLE AREA (for addition of cross references)

| POSITION                  | INITIALS           | ID NO. | DATE     |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION         |                    |        |          |
| O.I.P.E. CLASSIFIER       |                    |        |          |
| FORMALITY REVIEW          | CK                 | 1109   | 9-05-01  |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | 1091   | 10-24-01 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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11/10/01  
 9/16/01  
 8/25/01